

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF	KEVIN C. BRATHWAITE	COURT CASE NUMBER	04-1542-G.M.S.
DEFENDANT	JANE BRADY	TYPE OF PROCESS	CIVIL
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
→	JANE BRADY		
AT	820 N. French St Wilm De 19801		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:			
<input checked="" type="checkbox"/> KEVIN C. BRATHWAITE 1181 Paddock Rd. Smyrna De 19972			
Number of process to be served with this Form - 285 / Number of parties to be served in this case 27 <input type="checkbox"/> Check for service on U.S.A.			

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

CLERK U.S. DISTRICT COURT  
 DISTRICT OF DELAWARE  
 MAY 13 PM 4:00

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
Kevin Brathwaite	<input type="checkbox"/> DEFENDANT	NO	5-5-05

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk BF	Date 5/6/05
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I hereby certify and return that  I have personally served,  I have legal evidence of service,  I have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)  Malcolm Cobin - State Senator	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)	Date of Service 5/17/05	Time 1400 pm
Signature of U.S. Marshal or Deputy BR		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS: